

**OCT 05 2004**  
**PATENT**  
**OCT 04 2004**  
**J.C.24**  
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7590                    07/29/2004

William H. Honaker  
 HOWARD & HOWARD ATTORNEYS, P.C.  
 39400 Woodward Avenue, Suite 101  
 Bloomfield Hills, MI 48304-2856  
 10/06/2004 CNGUYEN1 00000019 09915835

01 FC:1504	300.00 OP
02 FC:2501	685.00 OP
03 FC:8001	30.00 OP

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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09/915,835	07/26/2001	Thomas J. Wielenga	60,472-003	7214
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 I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

Natalya DeVries	(Depositor's name)
<i>Natalya DeVries</i>	(Signature)
10/01/2004	(Date)

**TITLE OF INVENTION: SYSTEM AND METHOD FOR MINIMIZING INJURY AFTER A LOSS OF CONTROL EVENT**

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330-685	\$300	\$1630-985	10/29/2004
EXAMINER	ART UNIT		CLASS-SUBCLASS		
FLEMING, FAYE M	3616		180-275000		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
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*Howard & Howard*

2 \_\_\_\_\_  
 3 \_\_\_\_\_

**3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)**

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Dynamotive, LLC

Ann Arbor, MI

Please check the appropriate assignee category or categories (will not be printed on the patent):  individual  corporation or other private group entity  government

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4b. Payment of Fee(s):

Issue Fee  
 Publication Fee (No small entity discount permitted)  
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 Payment by credit card. Form PTO-2038 is attached.  
 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 08-2789 (enclose an extra copy of this form).

**5. Change in Entity Status (from status indicated above)**

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  
 b. Applicant is not claiming SMALL ENTITY status. See, e.g., 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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(Authorized Signature)

(Date)

10/01/04

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